

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>2/11/05</u>		2 Serial/Patent # <u>09/547,215</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
✓	Petition	22	7/8/04	\$ 55							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 55							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		✓	Credit Deposit A/C #:								
		9	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">7</td> <td style="width: 20px; text-align: center;">5</td> <td style="width: 20px; text-align: center;">0</td> </tr> </table>		0	2	--	1	7	5	0
0	2	--	1	7	5	0					
10 REASON:											
	Overpayment	<div style="border: 1px solid black; padding: 5px;">           9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">7</td> <td style="width: 20px; text-align: center;">5</td> <td style="width: 20px; text-align: center;">0</td> </tr> </table> </div>			0	2	--	1	7	5	0
0	2				--	1	7	5	0		
	Duplicate Payment										
✓	No Fee Due (Explanation):										
<u>W/drw hold abd → feeless pet.</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>E Shirene Welles</u>		TITLE: <u>Pet Attny</u>									
SIGNATURE: <u>E Shirene Welles</u>		PHONE: <u>272-3230</u>									
OFFICE: <u>Office of Relations</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>		DATE: <u>2/8/05</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B